KANSAS CORPORATION COMMISSION 1307866

Form CP-111 June 2011 Form must be Typed Form must be signed All blanks must be complete

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#                                      |                  |                 |               | API No. 15-          |   |                      |              |                |           |  |
|---|------------------|-----------------|---------------|----------------------|---|----------------------|--------------|----------------|-----------|--|
| Name:   |                  |                 |               | Spot Descri          | ption:                                    |                      |              |                |           |  |
| Address 1:  |                  |                 |               | .                    | Se  | c Twp                | S. R         |                | E 🗌 W     |  |
| Address 2:  |                  |                 |               |                      |   | feet fro             |              |                |           |  |
| City: State: Zip: +                                     |                  |                 |               | CRS Locatio          | GPS Location: Lat:, Long:, (e.gxxx.xxxxx) |                      |              |                |           |  |
| Contact Person:   |                  |                 |               | GF 5 LOCalit         |   | , L0<br>             | лıу(         | (e.gxxx.xxxxx) |           |  |
| Phone:()  |                  |                 |               |                      |   | Elevation:           |              | GI             | КВ        |  |
| Contact Person Email:                                   |                  |                 |               |                      |   |                      |              |                |           |  |
| Field Contact Person:                                   |                  |                 |               |                      |   | Dil 🗌 Gas 🗌 OG 🗌     |              |                |           |  |
| Field Contact Person Phon                               |                  |                 |               |                      | SWD Permit #: ENHR Permit #:              |                      |              |                |           |  |
|   | //               |                 |               |                      |   |                      |              |                |           |  |
|   |                  |                 |               | Spud Date:           |   | Date S               | nut-In:      |                |           |  |
|   | Conductor        | Surfac          | e I           | Production           | Intermedia                                | ate Li               | iner         | Tubing         | I         |  |
| Size  |                  |                 |               |                      |   |                      |              |                |           |  |
| Setting Depth   |                  |                 |               |                      |   |                      |              |                |           |  |
| Amount of Cement  |                  |                 |               |                      |   |                      |              |                |           |  |
| Top of Cement   |                  |                 |               |                      |   |                      |              |                |           |  |
| Bottom of Cement  |                  |                 |               |                      |   |                      |              |                |           |  |
| Casing Fluid Level from Su                              | Irface:          |                 | How Determine | d?                   |   |                      | Date         | :              |           |  |
| Casing Squeeze(s):                                      |                  |                 |               |                      |   |                      |              |                |           |  |
| Do you have a valid Oil & O                             | Gas Lease? 🗌 Yes | No              |               |                      |   |                      |              |                |           |  |
| Depth and Type: Dunk                                    | in Hole at       | Tools in Hole   | at (          | Casing Leaks:        | Yes No                                    | Depth of casing leak | (s):         |                |           |  |
| Type Completion:  |                  |                 |               |                      |   |                      |              |                | of cement |  |
|   |                  |                 | ,             |                      |   |                      | ı)           | 0.0111         |           |  |
| Packer Type:  |                  |                 |               |                      |   |                      |              |                |           |  |
|   | Plug B           | ack Depth:      |               | Plug Back Method     | od:                                       |                      |              |                |           |  |
| Total Depth:  |                  |                 |               |                      |   |                      |              |                |           |  |
| Total Depth:  |                  |                 |               |                      |   |                      |              |                |           |  |
| Geological Date:  | Formatio         | n Top Formation | n Base        |                      | Comp                                      | pletion Information  |              |                |           |  |
| Total Depth:<br>Geological Date:<br>Formation Name<br>1 |                  |                 |               | rforation Interval _ |   | bletion Information  | ole Interval | to             | Feet      |  |

## Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 D                       | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |
|--|---|--------------------|
|  | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000 |
| Image <th< td=""><td>KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720</td><td>Phone 620.432.2300</td></th<> | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720                             | Phone 620.432.2300 |
|  | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |

Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-225-8888 Fax: 620-225-8885 http://kcc.ks.gov/

Jay Scott Emler, Chairman Shari Feist Albrecht, Commissioner Pat Apple, Commissioner Sam Brownback, Governor

May 31, 2016

COLBY WELCH Horseshoe Operating, Inc. 110 W LOUISIANA STE 200 MIDLAND, TX 79701-3414

Re: Temporary Abandonment API 15-071-20145-00-00 HOPPE 1 NW/4 Sec.11-17S-40W Greeley County, Kansas

Dear COLBY WELCH:

"Your temporary abandonment (TA) application for the well listed above has been approved. In accordance with K.A.R. 82-3-111 the TA status of this well will expire 05/31/2017.

\* If you return this well to service or plug it, please notify the District Office.

\* If you sell this well you are required to file a Transfer of Operator form, T-1.

\* If the well will remain temporarily abandoned, you must submit a new TA application, CP-111, before 05/31/2017.

You may contact me at the number above if you have questions.

Very truly yours,

Scott Alberg"